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To: Examiner Andre K. Jackson Fax : (571) 273-2196
U.S. Patent Office Phone:

From: L. Grant Foster Fax : (801) 364-9124
Phone: (801) 595-7830

Message: Please see accompanying document.

No Confirmation Copy	Number of pages including cover sheet: 21
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Attorney Number: 5144	Client/Matter: 46263.0004 Time Deadline: _____
Operator Initials: KC	Date Transmitted: 10-14-04 Time Transmitted: _____

Holland & Hart Attorneys at Law

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60 E. South Temple Suite 2000 Salt Lake City, Utah 84111-1031

Arcan Alliance Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C.

PAGE 1/21 * RCVD AT 10/14/2004 5:35:08 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-3/26 * DNIS:2732196 * CSID:801 578 6010 * DURATION (mm:ss):04:42

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

U.S. PATENT APPLICATION SERIAL NO. 09/905,761
 FILING DATE 13 July 2001
 INVENTORS Gaylon S. Campbell et al.
 ASSIGNEE Decagon Devices, Inc.
 GROUP ART UNIT 2856
 EXAMINER Andre K. Jackson
 ATTORNEY'S DOCKET NO. 46269.0004
 TITLE "Moisture Detection Apparatus and Method"

TRANSMITTAL LETTER AND CERTIFICATE OF FACSIMILE TRANSMISSION

To: Commissioner for Patents From: L. Grant Foster
 P.O. Box 1450 HOLLAND & HART LLP
 Alexandria, VA 22313-1450 555 - 17th Street, Suite 3200
 P.O. Box 8749
 Denver, CO 80201
 Telephone: (801) 595-7830
 Facsimile: (801) 364-9124

Transmitted herewith are the items listed below submitted regarding the matter identified above:

1. Transmittal Letter with Certificate of Facsimile Transmission included
2. Amendment
3. Fee Calculation Sheet

Deposit Account Authorization - The Commissioner is hereby authorized to charge payment of or credit any applicable fees to Deposit Account No. 08-2623.

Date: 14 October 2004

By: L. Grant Foster
 L. Grant Foster
 Registration No. 33,236

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify the items listed above are being sent via facsimile (facsimile number (571) 273-2196 on the below indicated date to the Commissioner for Patents, Attention: Examiner Andre K. Jackson, Art Unit 2856.

Date: 14 October 2004

Signature: Kathy Case
 Name: Kathy Case

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APPLICANT'S CALCULATION OF TOTAL FEES DUE							
FEE TYPES							Amount (\$)
BASIC FEE (\$750/375)							
CLAIMS FEES	Number of Claims Remaining After Any Amendments	Minus the Larger		Equals	Times Rate (\$)		
		Number Allowed in Base Fee	Number of Claims For Which Fees Have Been Paid		Large Entity	Small Entity	
Total Claims	15	20	20	0	18.00	9.00	0.00
Indep. Claims	4	3	4	0	84.00	42.00	0.00
EXTENSION PETITION/FEES (\$) Applicant hereby petitions for an extension of time for response under 37 CFR 1.136(a) as indicated or as necessary to maintain the pendency of this application.				One month	110.00	55.00	
				Two months	410.00	205.00	
				Three months	930.00	465.00	
				Four months	1,450.00	725.00	
				Five months	1,970.00	985.00	
ANY OTHER FEES							
TOTAL FEES OWED							\$ 0.00

Deposit Account Authorization - The Commissioner is hereby authorized to charge any necessary payments or credit any applicable fees to Deposit Account No. 08-2623.

Date: 14 OCTOBER 2004

By 
L. Grant Foster
 Registration No. 33,236

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